Application or Docket Number **SMALL ENTITY** OTHER THAN TYPE [ **SMALL ENTITY** OR RATE FEE RATE FEE 380.00 760.00 OR X\$ 9= 351.W X\$18= OR X39= 17.00 X78= OR +260= +130= OR

OR TOTAL

RATE

X\$18=

X78=

+260=

RATE

X\$18=

TOTAL OR ADDIT. FEE

OR

OR

OR

**OTHER THAN** SMALL ENTITY

ADDI-

TIONAL

FEE

ADDI-

TIONAL

FEE

TOTAL

RATE

X\$ 9=

X39=

+130=

ADDIT, FEE

RATE

X\$ 9=

TOTAL

SMALL ENTITY OR ADDI-

TIONAL

FEE

ADDI-

TIONAL

FEE

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Elicotive November 10, 1990						
CL	IMS AS I	FILED - PA	RT	1		
	(Colu	ımn 1)		(Column 2)		
FOR	NUMBER	FILED	NU	MBER EXTRA		
BASIC FEE						
TOTAL CLAIMS	.59	minus 20=	·	39		
INDEPENDENT CLAIMS	6	minus 3 =	*	3		
MULTIPLE DEPENDENT	CLAIM PRE	SENT		N		
* If the difference in colu	umn 1 is les	s than zero,	enter	r "0" in column 2		
n/a.) CIAIM	SASAM	ENDED - E	ΔQ	T II		

り	1						
$\coprod$	124104	(Column 1)		(Column 2)	(Column 3)		
ENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT . EXTRA		
AMENDMENT	Total	· 5X	Minus	<del>**</del> 54	=		
	independent	. 6	Minus	··· 6	=		
14	CIDET DESCRIPTION OF ANH TIDLE DESCRIPTION AND						

	$\nu$	•		$\Psi \mathcal{X}$
FIRST PRESENTATION	OF MU	ILTIPLE DEF	PENDENT	CLAIM

		(Column 1)		(Column 2)	(Column 3)
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
NON	Total	•	Minus	**	3
ME	Independent	*	Minus	***	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

		(Column 1)		(Column 2)	(Column 3)	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	* .	Minus	**	=	
	Independent	#	Minus	***	=	
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

The "Highest Number Previously Paid For" (Total or Independent) is the highest number for

- 1							
	X39=		OR	X78=			
	+130=	,	OR	+260=			
	TOTAL ADDIT: FEE		OR	TOTAL ADDIT, FEE			
	RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE		
	X\$ 9≈		OR	X\$18=			
	X39=		OR	X78=			
	+130=		OR	+260=			
TOTAL OR TOTAL ADDIT. FEE							
OU	ound in the appropriate box in column 1.						
ate	atent and Trademark Office, U.S. DEPARTMENT OF COMMERCE						

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\*if the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."